

Registration Form
Illinois Fallen Soldier Memorial
5K/10K Fun Run or Walk
Sept. 10, 2016
Illini State Park in Marseilles, Illinois

Name: _____ Age: _____ as of Sept. 10, 2016
Address: _____
Phone: _____ Email: _____
Emergency Contact: _____ Phone: _____
Check One: _____ Circle One: _____
☐ 5K ☐ 10K T-shirt size: S M L XL XXL

\$30 Participation donation, which includes a T-shirt, beverages and snacks. You can submit your registration by mail to:
Illini State Park 2660 E 2350th Rd Marseilles, IL 61341 or drop it off at CP's Ice Cream or the park office. **Please make
checks out to: The Illinois Fallen Soldier's Memorial Fund**

Register by Sept. 05 at 4:00 p.m.

Check-in and packet pick up will be at the CP's Ice Cream and Concession, Illini State Park 6:30 – 7:30 a.m. the day of the
race, with a 8:00 a.m. START

This event is sponsored by CP's Ice Cream and Concessions

WAIVER AND RELEASE OF ALL CLAIMS
FOR PLANNED EVENT:

All participants involved in the Illinois Fallen Soldier Fun Run/Walk 2016 held on September 10, 2016 recognize and acknowledge
that there are certain risks of physical injury and (Print Name) _____ agrees to assume
the full risk of any injury, damages or losses which may be sustained as a result of this activity.

We do hereby fully release and discharge the Illinois Department of Natural Resources, Illini State Park Foundation and CP's Ice
Cream including its members, officers, agents, servants, independent contractors and employees (hereinafter referred collectively as
the Sponsor) from any and all claims from injuries, damages or losses which may have or which may accrue while participating in the
5K/10K Fun Run or Walk.

I further agree to release from liability, indemnify and hold harmless and defend the Sponsor from any and all claims resulting from
injuries, damages and losses sustained by (Print Name) _____ (Parents Name if minor
child under the age of 18) _____ and its participants and arising out of, connected with,
or in any way associated with my activities.

I have read and fully understand the nature of the above waiver and release of ALL CLAIMS.

Signature

Date